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HZ/RC/GT 8/26/10  
EP

OMB# 2050-0024; Expires 11/30/2011

<b>SEND COMPLETED FORM TO:</b> The Appropriate State or Regional Office.	United States Environmental Protection Agency <b>RCRA SUBTITLE C SITE IDENTIFICATION FORM</b>		
<b>1. Reason for Submittal</b>  MARK ALL BOX(ES) THAT APPLY	<b>Reason for Submittal:</b> <input type="checkbox"/> To provide an Initial Notification (first time submitting site identification information / to obtain an EPA ID number for this location) <input checked="" type="checkbox"/> To provide a Subsequent Notification (to update site identification information for this location) <input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application <input type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # _____) <input type="checkbox"/> As a component of the Hazardous Waste Report (If marked, see sub-bullet below) <input type="checkbox"/> Site was a TSD facility and/or generator of $\geq 1,000$ kg of hazardous waste, $>1$ kg of acute hazardous waste, or $>100$ kg of acute hazardous waste spill cleanup in one or more months of the report year (or State equivalent LQG regulations)		
<b>2. Site EPA ID Number</b>	EPA ID Number TXR 0000063909		
<b>3. Site Name</b>	Name: UTS Environmental		
<b>4. Site Location Information</b>	Street Address: 9000 Liberty Rd		
	City, Town, or Village: HOUSTON		County: Harris
	State: Texas	Country: USA	Zip Code: 77028
	<b>5. Site Land Type</b> <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Tribal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		
<b>6. NAICS Code(s) for the Site (at least 5-digit codes)</b>	A. 562111		C.
	B. 562112		D.
<b>7. Site Mailing Address</b>	Street or P.O. Box: 9000 Liberty Rd		
	City, Town, or Village: HOUSTON		
	State: Texas	Country: USA	Zip Code: 77028-5713
<b>8. Site Contact Person</b>	First Name: Dean		MI: Last: Artero
	Title: Manager		
	Street or P.O. Box: 9000 Liberty Rd		
	City, Town or Village: HOUSTON		
	State: Texas	Country: USA	Zip Code: 77028-5713
	Email: dartero@c4env.com		
	Phone: 713 676 1880	Ext.:	Fax: 281 645 1845
<b>9. Legal Owner and Operator of the Site</b>	A. Name of Site's Legal Owner: C4 Liberty Holding		Date Became Owner: April 2008
	Owner Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Tribal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		
	Street or P.O. Box: 9000 Liberty Rd		
	City, Town, or Village: HOUSTON		Phone: 713 670 0200
	State: Texas	Country: USA	Zip Code: 77028-5713
	B. Name of Site's Operator: C4 Liberty Holding		
	Operator Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Tribal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		

## 10. Type of Regulated Waste Activity (at your site)

Mark "Yes" or "No" for all current activities (as of the date submitting the form); complete any additional boxes as instructed.

## A. Hazardous Waste Activities; Complete all parts 1-7.

Y ☒ N ☐

## 1. Generator of Hazardous Waste

If "Yes", mark only one of the following - a, b, or c.

- ☐ a. LQG: Generates, in any calendar month, 1,000 kg/mo (2,200 lbs./mo.) or more of hazardous waste; or Generates, in any calendar month, or accumulates at any time, more than 1 kg/mo (2.2 lbs./mo) of acute hazardous waste; or Generates, in any calendar month, or accumulates at any time, more than 100 kg/mo (220 lbs./mo) of acute hazardous spill cleanup material.
- ☐ b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs./mo) of non-acute hazardous waste.
- ☒ c. CESQG: Less than 100 kg/mo (220 lbs./mo) of non-acute hazardous waste.

If "Yes" above, indicate other generator activities.

Y ☐ N ☒

- d. Short-Term Generator (generate from a short-term or one-time event and not from on-going processes). If "Yes", provide an explanation in the Comments section.

Y ☐ N ☒

- e. United States Importer of Hazardous Waste

Y ☐ N ☒

- f. Mixed Waste (hazardous and radioactive) Generator

Y ☒ N ☐

## 2. Transporter of Hazardous Waste

If "Yes", mark all that apply.

- ☒ a. Transporter
- ☒ b. Transfer Facility (at your site)

Y ☐ N ☒

## 3. Treater, Storer, or Disposer of Hazardous Waste Note: A hazardous waste permit is required for these activities.

Y ☐ N ☒

## 4. Recycler of Hazardous Waste

Y ☐ N ☒

## 5. Exempt Boiler and/or Industrial Furnace If "Yes", mark all that apply.

- ☐ a. Small Quantity On-site Burner Exemption
- ☐ b. Smelting, Melting, and Refining Furnace Exemption

Y ☐ N ☒

## 6. Underground Injection Control

Y ☐ N ☒

## 7. Receives Hazardous Waste from Off-site

## B. Universal Waste Activities; Complete all parts 1-2.

Y ☒ N ☐

1. Large Quantity Handler of Universal Waste (you accumulate 5,000 kg or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste managed at your site. If "Yes", mark all that apply.

- a. Batteries ☒
- b. Pesticides ☐
- c. Mercury containing equipment ☒
- d. Lamps ☒
- e. Other (specify) electronics ☒
- f. Other (specify) \_\_\_\_\_ ☐
- g. Other (specify) \_\_\_\_\_ ☐

Y ☐ N ☒

## 2. Destination Facility for Universal Waste

Note: A hazardous waste permit may be required for this activity.

## C. Used Oil Activities; Complete all parts 1-4.

Y ☒ N ☐

## 1. Used Oil Transporter

If "Yes", mark all that apply.

- ☒ a. Transporter
- ☒ b. Transfer Facility (at your site)

Y ☐ N ☒

## 2. Used Oil Processor and/or Re-refiner If "Yes", mark all that apply.

- ☐ a. Processor
- ☐ b. Re-refiner

Y ☐ N ☒

## 3. Off-Specification Used Oil Burner

Y ☐ N ☒

## 4. Used Oil Fuel Marketer

If "Yes", mark all that apply.

- ☐ a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner
- ☐ b. Marketer Who First Claims the Used Oil Meets the Specifications

EPA ID Number

TXR000063909

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**D. Eligible Academic Entities with Laboratories—Notification for opting into or withdrawing from managing laboratory hazardous wastes pursuant to 40 CFR Part 262 Subpart K**

- ❖ You must check with your State to determine if you are eligible to manage laboratory hazardous wastes pursuant to 40 CFR Part 262 Subpart K

- ☐ 1. Opting into or currently operating under 40 CFR Part 262 Subpart K for the management of hazardous wastes in laboratories  
See the item-by-item instructions for definitions of types of eligible academic entities. Mark all that apply:

☐ a. College or University

☐ b. Teaching Hospital that is owned by or has a formal written affiliation agreement with a college or university

☐ c. Non-profit Institute that is owned by or has a formal written affiliation agreement with a college or university

- ☐ 2. Withdrawing from 40 CFR Part 262 Subpart K for the management of hazardous wastes in laboratories

**11. Description of Hazardous Waste****A. Waste Codes for Federally Regulated Hazardous Wastes.** Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.

D001	D002	D003	D004	D005	D018	D007
D010	D008	D023	D024	D025	D026	D009
D035	D040					
F001	F002	F003	F004	F005	F006	<del>F007</del>
<del>F008</del>	<del>F009</del>	<del>F010</del>	<del>F011</del>	F019	F037	F038
F039						
K059	K050	K051	K052	K169	K170	K171
K172						

**B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes.** Please list the waste codes of the State-Regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed.

205	206	001	003	002	004	101
102	103	104	105	106	109	110
113	114	115	116	203	301	302
304	308	309	310	389	390	393
404	488	489	490	493	510	514

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**12. Notification of Hazardous Secondary Material (HSM) Activity**

Y ☒ N ☐ Are you notifying under 40 CFR 260.42 that you will begin managing, are managing, or will stop managing hazardous secondary material under 40 CFR 261.2(a)(2)(ii), 40 CFR 261.4(a)(23), (24), or (25)?

If "Yes", you must fill out the Addendum to the Site Identification Form: Notification for Managing Hazardous Secondary Material.

**13. Comments**

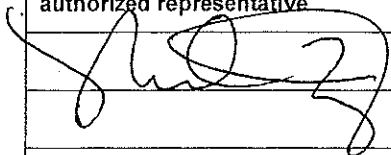
Notification of used oil transportation

only

**14. Certification.** I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations. For the RCRA Hazardous Waste Part A Permit Application, all owner(s) and operator(s) must sign (see 40 CFR 270.10(b) and 270.11).

Signature of legal owner, operator, or an authorized representative

Name and Official Title (type or print)

Date Signed  
(mm/dd/yyyy)

MICHAEL ZILKA President

07/10/2010